

November 1, 2019

Bard Access Systems, Inc. (Bard has joined BD) % Dave Yungvirt CEO
Third Party Review Group, LLC
25 Independence Blvd
Warren, New Jersey 07059

Re: K190855

Trade/Device Name: BD Acute Central Line Regulation Number: 21 CFR 880.5200

Regulation Name: Intravascular catheter

Regulatory Class: Class II Product Code: FOZ Dated: October 3, 2019 Received: October 7, 2019

Dear Dave Yungvirt:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. Although this letter refers to your product as a device, please be aware that some cleared products may instead be combination products. The 510(k) Premarket Notification Database located at https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpmn/pmn.cfm identifies combination product submissions. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal

statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803) for devices or postmarketing safety reporting (21 CFR 4, Subpart B) for combination products (see https://www.fda.gov/combination-products/guidance-regulatory-information/postmarketing-safety-reporting-combination-products); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820) for devices or current good manufacturing practices (21 CFR 4, Subpart A) for combination products; and, if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to https://www.fda.gov/medical-device-problems.

For comprehensive regulatory information about medical devices and radiation-emitting products, including information about labeling regulations, please see Device Advice (https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance) and CDRH Learn (https://www.fda.gov/training-and-continuing-education/cdrh-learn). Additionally, you may contact the Division of Industry and Consumer Education (DICE) to ask a question about a specific regulatory topic. See the DICE website (https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/contact-us-division-industry-and-consumer-education-dice">https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/contact-us-division-industry-and-consumer-education-dice) for more information or contact DICE by email (DICE@fda.hhs.gov) or phone (1-800-638-2041 or 301-796-7100).

Sincerely,

Geeta Pamidimukkala
Acting Assistant Director
DHT3C: Division of Drug Delivery and
General Hospital Devices,
and Human Factors
OHT3: Office of Gastrorenal, ObGyn,
General Hospital and Urology Devices
Office of Product Evaluation and Quality
Center for Devices and Radiological Health

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration

Indications for Use

Form Approved: OMB No. 0910-0120

Expiration Date: 06/30/2020 See PRA Statement below.

510(k) Number (if known)		
K190855		
Device Name		
BD Acute Central Line		
BB House Commun Emic		
Indications for Use (Describe)		

Acute central venous catheters are indicated to provide short-term access (<30 days) to the central venous system. They are designed for administering I.V. fluids, blood products, drugs and parenteral nutrition solutions, as well as blood withdrawal, central venous pressure monitoring, and power injection of contrast media.

Catheter Length	Lumen(s)	Power Injection Flow Rate	Maximum Power Injector Pressure Setting
16 cm and 20 cm	Distal	10 mL/sec	
	Medial / Proximal	9 mL/sec	325 psi
30 cm	Distal	9 mL/sec	
	Medial/ Proximal	7 mL/sec	

Type of Use (Select one or both, as applicable)	
Prescription Use (Part 21 CFR 801 Subpart D)	Over-The-Counter Use (21 CFR 801 Subpart C)

This section applies only to requirements of the Paperwork Reduction Act of 1995.

CONTINUE ON A SEPARATE PAGE IF NEEDED.

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K190855 510(k) Summary for BD Acute Central Line

	Submitt	er Name:		Bard Access Syste	ms, Inc. (Bard has joine	d BD)
	Submitt	er Address:		605 North 5600 West Salt Lake City, UT 84116		
General Provisions	Contact	Contact Person:		Sean Loring Regulatory Affairs Specialist		
	Telepho	one Number:		801.522.5634		
	Fax Nur	mber:		801.522.5425		
	Date of	Preparation:		10/31/2019		
	Trade N	lame(s):		BD Acute Central L	ine	
	Commo	on Name:		Acute Central Line		
	Classific	cation Name:			ular, Therapeutic, Short	-Term Less
Subject	Class:			than 30 days		
Device	Regulat	ion Number:		2		
	Product	: Code:		21 CFR 880.5200		
	Classific	cation Panel		FOZ		
				General Hospital		
	Predica	te Trade Name:		Arrow Central Vend	ous Catheter	
	Classific	cation Name:			ular, Therapeutic, Short	-Term Less
	Class:		than 30 days			
	Product	: Code:		2		
Predicate Device	Regulat	Regulation Number:		FOZ		
201.00	Premarl	emarket Notification #:		21 CFR 880.5200		
	Manufa	anufacturer:		K071538		
	Classific	cation Panel		Arrow		
				General Hospital		
	A family of power injectable central venous catheters constructed of medical grade polyurethane and is designed for insertion into the central venous system. BD power injectable acute central lines are radiopaque, and have a soft tip that is more pliable than the catheter body. Each catheter is provided in a sterile package with applicable insertion kit accessories. The maximum pressure injector settings and maximum power injection flow rate are specified in the table below:					
Device Description		Catheter Length	Lumen(s)	Power Injection Flow Rate	Maximum Power Injector Pressure Setting	
		16 cm and 20 cm	Distal	10 mL/sec		
			Medial / Proximal	9 mL/sec	325 psi	
		30 cm	Distal Medial/ Proximal	9 mL/sec 7 mL/sec		
Intended Use		te Central Lines are in and blood sampling.		1	al venous system for inti	ravenous
Indications for Use					ess (<30 days) to the ce s, drugs and parenteral r	

solutions, as well as blood withdrawal	, central venous pressure monitoring,	and power injection of contrast
media.		

Catheter Length	Lumen(s)	Power Injection Flow Rate	Maximum Power Injector Pressure Setting
16 cm and 20 cm	Distal	10 mL/sec	
16 cm and 20 cm	Medial / Proximal	9 mL/sec	325 psi
30 cm	Distal	9 mL/sec	·
	Medial/ Proximal	7 mL/sec	

Technological characteristics of the subject BD Acute Central Line are substantially equivalent with respect to basic design, function and fundamental scientific technology to those of the cited predicate device.

Key differences in the subject device when compared to the predicate device are as follows:

- Lumen geometry
- Offering of a 7 Fr x 30 cm length in subject device (BD Acute Central Line)

The following table provides a comparison between the subject and predicate devices.

	The following tab	le provides a comparison between the su	bject and predicate devices.	
	Attribute	Subject Device – BD Acute Central Line	Predicate Device – Arrow Central Venous Catheter	Discussion of Characteristics between subject and predicate
	Owner	Bard Access Systems, Inc.	Arrow	
	Classification	Same	FOZ – 21 CFR 880.5200	Classification of subject device is the same as the predicate
	510(k) Status	Subject of this Premarket Notification	K071538 – Concurrence date August 30, 2007	
Technological Characteristics	Indications for Use	Acute central venous catheters are indicated to provide short-term access (< 30 days) to the central venous system. They are designed for administering I.V. fluids, blood products, drugs and parenteral nutrition solutions, as well as blood withdrawal, central venous pressure monitoring, and power injection of contrast media. Catheter Length Lumen(s) Power Injection Maximum Power Injector Pressure Setting 16 cm and 20 cm Distal 10 mL/sec 325 psi 30 cm Distal 9 mL/sec 325 psi 30 cm Medial / Proximal 7 mL/sec 325 psi 325 psi	The Arrow CVC is intended to provide short-term (<30 days) central venous access for treatment of diseases or conditions requiring central venous access, including, but not limited to the following: • Lack of usable peripheral IV sites • Central venous pressure monitoring • Total parenteral nutrition (TPN) • Infusions of fluids, medications, or chemotherapy • Frequent blood sampling or receiving blood transfusions/blood products	Indications for use between the subject and predicate devices are substantially equivalent.
	Commercial Name	BD Acute Central Line	Arrow Central Venous Catheter	

Catheter Dimensions	7 Fr Triple Lumen x 16 cm 7 Fr Triple Lumen x 20 cm 7 Fr Triple Lumen x 30 cm	7 Fr Triple Lumen x 16 cm 7 Fr Triple Lumen x 20 cm	Additional catheter length of 30 cm does not raise new or different questions of safety or effectiveness and a risk assessment did not identify any new or significantly modified risks.
Duration of Use	Same	Short term (<30 days)	Both the subject and predicate devices are indicated for use for less than 30 days.
Means of insertion	Same	Percutaneous	Means of insertion is identical between the subject and predicate devices.
Insertion Site	Same	Jugular, subclavian, or femoral veins	Insertion sites for the subject and predicate devices are identical.
Primary Device Materials	Catheter Base Materials Shaft Tubing: Polyurethane Luer Connector: Polyurethane Extension Legs: Polyurethane Junction: Polyurethane	Catheter Base Materials Shaft Tubing: Polyurethane Luer Connector: Polyurethane Extension Legs: Polyurethane Junction: Polyurethane	Catheter base materials for the predicate device are proprietary.
Catheter Proximal Configuration	Same	Side-hole skive	Lumen configurations are substantially equivalent between the subject and predicate devices.
Catheter Medial Configuration	Same	Side-hole skive	Lumen configurations are substantially equivalent between the subject and

			predicate devices.
Catheter Distal Configuration	Same	Formed tip	Tip configurations of the subject and the predicate device are substantially equivalent.
Number of Lumens	Same	Triple Lumen	Same as predicate device.
Power Injection Maximum Flow Rate	 Distal (17 Ga.) – 10 mL/sec Medial (18 Ga.) – 9 mL/sec Proximal (18 Ga.) – 9 mL/sec 30 cm length: Distal (17 Ga.) – 9 mL/sec Medial (18 Ga.) – 7 mL/sec Proximal (18 Ga.) – 7 mL/sec Proximal (18 Ga.) – 7 mL/sec 	16 and 20 cm length: • Distal (16 Ga.) – 10 mL/sec • Medial (18 Ga.) – 5 mL/sec • Proximal (18 Ga.) – 5 mL/sec	Differences in power injection maximum flow rates do not raise additional questions of safety or effectiveness.
Sterility	Same (10 ⁻⁶) Ethylene Oxide AAMI 11135:2014	Provided Sterile	The subject and predicate devices are both provided sterile.

The technological differences listed above were evaluated using industry consensus standards, and as defined in the Risk Assessment. Therefore, these differences in technological characteristics between the subject and predicate devices do not raise new or different questions of safety or effectiveness.

The following performance tests were conducted by or for BAS per guidance documents and standards in conjunction with in-house protocols to establish the performance of the BD Acute Central Line, and in determining substantial equivalence to the predicate Arrow Central Venous Catheter. All testing passed the predetermined acceptance criteria.

Safety & Performance Tests

Biocompatibility Testing

Tests to confirm that the catheter is free from biological hazard per testing. A health-based risk assessment per ISO 10993-1 was performed for determining the acceptability of the material for the intended purpose. Testing Performed includes:

Reference Standard: ISO 10993-1:2009 - Biological Evaluation of Medical Devices - Part 1: Evaluation and

- Cytotoxicity
- Sensitization
- Irritation or Intracutaneous Reactivity
- Acute Systemic Toxicity
- Pyrogenicity
- Subchronic Systemic Toxicity
- Genotoxicity
- Hemocompatibility
- Implantation

Reference Standard: ISO 10555-1:2013 – Sterile Single-Use Intravascular Catheters – Part 1: General requirements

Clamp Engagement	Test to confirm that the catheter assembly will not leak when the clamp is engaged.
Leak Test	Test to confirm that the catheter assembly will not leak when the distal end of the catheter is occluded.

Dimensional Test	Test to measure OD and ID for single lumen catheters and OD and lumen area for dual lumen catheters to ensure compliance with dimensional specification.				
Implantable Length	Test to measure useful length for catheters to ensure compliance with dimensional specification.				
Extension Leg Length	Leg Length Test to measure and confirm extension leg length compliance with dimensional specification.				
Burst Test	Burst pressure test to confirm the catheter burst pressure exceeds the peak pressure present in the catheter at maximum flow conditions when the distal end is occluded.				
Hydraulic Catheter Burst Test	Burst pressure test to confirm the catheter burst pressure exceeds the peak pressure present in the catheter at maximum flow conditions when the distal end is occluded.				
Power Injection Conditioning	Test to confirm the catheter does not leak or burst as a result of power injections at maximum indicated flow rate.				
Gravity Flow	Test to measure the gravity flow performance of a full-length catheter.				
Luer to Extension Leg Tensile Test					
Extension Leg to Trifurcation Tensile Test	Test to demonstrate the peak tensile force of each test piece exceeds the minimum				
Trifurcation to Shaft Tensile Test	peak tensile force.				
Shaft Tensile Test					
Reference Stand	dard: ASTM F640-12 – Standard Test Methods for Radiopacity of Plastics for Medical Use				
Radiopacity	Test to demonstrate catheter radio-detectability				
Reference Standard: ISO	10555-3:2013 – Intravascular catheters – Sterile and single-use catheters – Part 3 Central venous catheters				
Tip Tensile Test to demonstrate the peak tensile force of each test piece exceeds the minimum peak tensile force.					
Reference Guidance:	Reference Guidance: FDA Guidance on Premarket Notification [510(k)] Submission for Short-Term and Long-Term Intravascular Catheters, 1995				
Catheter Collapse Test	Test to measure the flow rate of aspiration and demonstrate that the catheter will no collapse under a vacuum.				
Catheter Collapse Test Shaft Tensile Test					
	collapse under a vacuum.				
Shaft Tensile Test Suture Wing Integrity	collapse under a vacuum. Test to evaluate the maximum catheter strain and modulus at break. Test to measure the maximum force a catheter junction suture wing can withstand				
Shaft Tensile Test Suture Wing Integrity Test	collapse under a vacuum. Test to evaluate the maximum catheter strain and modulus at break. Test to measure the maximum force a catheter junction suture wing can withstand prior to break.				
Shaft Tensile Test Suture Wing Integrity Test Priming Volume	collapse under a vacuum. Test to evaluate the maximum catheter strain and modulus at break. Test to measure the maximum force a catheter junction suture wing can withstand prior to break. Test to measure the volume required to prime a full-length catheter. Test to confirm that the catheter does not swell beyond twice the size of the labeled OD during power injection. Test to confirm that the catheter tip remains in the same orientation during power				
Shaft Tensile Test Suture Wing Integrity Test Priming Volume OD Swell	Collapse under a vacuum. Test to evaluate the maximum catheter strain and modulus at break. Test to measure the maximum force a catheter junction suture wing can withstand prior to break. Test to measure the volume required to prime a full-length catheter. Test to confirm that the catheter does not swell beyond twice the size of the labeled OD during power injection. Test to confirm that the catheter tip remains in the same orientation during power injection (tip pointing in direction of venous flow) at the maximum indicated flow rate.				
Shaft Tensile Test Suture Wing Integrity Test Priming Volume OD Swell Tip Stability Test	Test to evaluate the maximum catheter strain and modulus at break. Test to measure the maximum force a catheter junction suture wing can withstand prior to break. Test to measure the volume required to prime a full-length catheter. Test to confirm that the catheter does not swell beyond twice the size of the labeled OD during power injection. Test to confirm that the catheter tip remains in the same orientation during power injection (tip pointing in direction of venous flow) at the maximum indicated flow rate. Test to ensure that the guidewire used to place the catheter can be removed without				

	Reference Standards: ISO 594: Conical Fittings for a 6% (Luer) Taper for Syringes, Needles, and Certain Other Medical Equipment – Part 1: General Requirements and Part 2: Lock Fittings			
	Luer Testing	Testing to ensure that luer connectors meet requirements for Leak Leak Decay Stress Cracking Resistance to Separation from Axial Load Resistance to Separation from Unscrewing Resistance to Overriding Gauging		
	Referer	nce Standard: USP<788>: Sizing and Counting Particulate Matter		
	Particulate Testing	Testing to ensure that particulate matter on the catheter post-manufacture is not exceeded for prescribed particle sizes.		
	Reference Standard: FD	FDA Guidance on Establishing Safety and Compatibility of Passive Implants in the Magnetic Resonance (MR) Environment, 2014		
	MR Safety	Testing to demonstrate that the subject device is safe for use in an MR environment.		
Diagram	18 GA 9 9 18 GA	Trifurcation/ Suture Wing MEDIAL DISTAL PROXIMAL DISTAL PROXIMAL DISTAL PROXIMAL Catheter Shaft Tubing Extension Legs		
Technological Comparison to Predicate Device	to the basic design and fur materials in the subject de priming volumes, differ fro	tics of the subject BD Acute Central Line are substantially equivalent with regard nction of the predicate device, Arrow Central Venous Catheter (K071538). The evice, as well as the flow rates, lumen geometry, catheter use pressure and om the predicate device. However, these differences do not alter the intended use do not raise any new or different questions regarding safety or effectiveness edicate device.		
Summary of Substantial Equivalence	Based on the risk management activities and testing, the subject BD Acute Central Line has been demonstrated to be substantially equivalent to the cited predicate device.			

Conclusion:

Based on the indications for use, technological characteristics, and results of performance testing, the subject BD Acute Central Line has been demonstrated to be substantially equivalent to the predicate devices.